By attending a field trip or ancillary activity outside of the general conference you may be exposed to hazardous chemicals; harsh lighting; uneven terrain; gaseous fumes; excessive heat; insects and poisonous animals; allergens; outdoor exposure to the elements, such as lightning, wind, storms; and other agents that may cause potential harm that may be unforeseen. By checking the box in registration, you understand that due to your participation you may be at risk of this and anything unforeseen, and agree to the below.

In consideration of being allowed to participate in the above-mentioned Northern Arizona University Program ("Program") and related activities, I, __________ [signed in registration by clicking online box]__, on behalf of myself and my spouse, if any, and our heirs, successors, and assigns:

1. Acknowledge and understand that participation in the Program may involve a variety of activities. Such participation, particularly in field trips, "wilderness trips", and similar events, may involve risks, including but not limited to, personal injury, partial or permanent disability, property damage, and/or death. These risks may result from my own actions or inactions, from the actions or inactions of others, or may be inherent to participating in the Program. I also understand that Northern Arizona University is not an agent of and has no responsibility for any third party that may provide any services during the Program, including but not limited to, food, lodging, travel, and equipment associated with the Program. I understand that I am responsible for ensuring that I am properly prepared for all Program activities, and I represent that I am in good health and am able to participate fully in all Program activities.

2. Assume all of the foregoing risks and accept personal and financial responsibility for all damages for personal injury, partial or permanent disability, property damage, or death, caused by me, to the fullest extent allowed by law.

3. Agree not to sue the State of Arizona, the Arizona Board of Regents, Northern Arizona University, their officers, employees, agents, and assigns, and waive all claims, demands, losses, or damages on account of personal injury, partial or permanent disability, property damage, or death, caused or alleged to be caused in whole or in part by the actions of any person or entity, to the fullest extent allowed by law.

4. Grant to Northern Arizona University and to its employees, agents and assigns the right to photograph me and use the photo and or other digital reproduction of me or other reproduction of my physical likeness for publication processes for use in connection with Northern Arizona University Programs, whether electronic, print, digital or via the Internet, so long as I have signed this form.

5. Understand that the only medical treatment that will be provided by the Program is for such things as minor scrapes and bruises. Any medical costs, including emergency medical treatment that may be incurred as a result of my participation in the Program will be my financial responsibility. I further understand that medical care facilities may not be immediately available and I accept the increased risk in the event of injury or death.

6. Hereby consent to Northern Arizona University and any appropriate medical facility, and/or to the physician(s) listed below, providing whatever medical services they may deem necessary in the event of an emergency. I certify that I have adequate insurance and/or other means to pay for any costs and expenses related to these services and I agree to bear such costs and expenses in full.

7. Agree to review Program rules and agree I will comply with Northern Arizona University’s rules, standards, as well as any specific standards of conduct of the Program that may be provided. I understand that I am not permitted to consume alcohol, possess/use weapons or illegal substances, or engage in sexual activities while participating in the Program. I understand that I may be removed from the Program for misconduct or failure to follow rules or instructions of Northern Arizona University or for any behavior detrimental to or incompatible with the standards of Northern Arizona University or the Program, and I understand that in that event I may not be entitled to a refund of any or all Program fees and costs.

8. Waive and release all claims against the State of Arizona, the Arizona Board of Regents, and Northern Arizona University, their officers, employees, agents, and assigns that arise at a time when I am not under the direct supervision of Northern Arizona University or that are caused by my failure to remain under such supervision or to comply with rules or instructions, to the fullest extent allowed by law.

9. Acknowledge and understand that either I or Northern Arizona University has the right to decline, decrease, or cease my participation in the event of illness, injury or other medical condition.

10. Understand that Northern Arizona University may reduce or stop my participation, in its sole discretion, in the best interest of safety or to aid in the well-being of other participants. Northern Arizona University may require further assessment and medical clearance from a physician prior to participation in the Program.

11. ACKNOWLEDGE THAT I HAVE CAREFULLY READ THE ABOVE ASSUMPTION OF RISK, WAIVER, RELEASE, AND CONSENT AND UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

12. No oral or written representation can or will alter the contents of this document. I agree that this document shall be governed by the laws of the State of Arizona.

Participant Signature: _______ [signed in registration by clicking online box]__, _____________________ Date: _______ [reg]_________